



ISSUE SLIP STAFF AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>[Signature]</i>	<i>10</i> <i>69300</i>	<i>7/1/69</i>
O.I.P.E. CLASSIFIER			<i>7/1/69</i>
FORMALITY REVIEW			<i>7/1/69</i>

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
= ..... Allowed      I ..... Interference  
- (Through numeral) ..... Canceled      A ..... Appeal  
+ ..... Restricted      O ..... Objected

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BEST AVAILABLE COPY      If more than 150 claims or 10 actions  
staple additional sheet here

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